Application Data Sheet

Application Information

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD disks::

Number of Copies of CDs::

Sequence Submission?:: None

Computer Readable Form (CRF):: No

Number of copies of CRF:: 0

Title:: HEAT-EMITTING PATIENT GARMENT

Attorney Docket Number:: 1501-1285

Request for Early Publication?:: No Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 1

Small Entity?:: No

Latin Name::

Variety Denomination Name::

Petition Included?:: No

Petition Type::

Licensed US Gov't Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: SWEDEN

Status:: Full Capacity

Given Name:: ANGELICA

Middle Name::

Family Name:: MALMBERG

Name Suffix::

City of Residence:: KUNGSBACKA

State or Province of

Residence::

Country of Residence:: SWEDEN

Street of Mailing HAKANSGARDSGATAN 60

Address::

City of Mailing Address:: KUNGSBACKA

State or Province of Mailing Address::

Country of Mailing Address:: SWEDEN

Postal or Zip Code of Mailing Address:: S-434 00

Applicant Authority Type:: Inventor

Primary Citizenship Country:: SWEDEN

Status:: Full Capacity

Given Name:: TINA

Middle Name::

Family Name:: RAUK BERGSTROM

Name Suffix::

City of Residence:: VASTRA FROLUNDA

State or Province of

Residence::

Country of Residence:: SWEDEN

Street of Mailing PURPURGATAN 49

Address::

City of Mailing Address:: VASTRA FROLUNDA

Page #2

Initial 12/30/04

State or Province of Mailing Address::

Country of Mailing Address:: SWEDEN

Postal or Zip Code of Mailing Address:: S-421 65

Applicant Authority Type:: Inventor
Primary Citizenship Country:: SWEDEN

Status:: Full Capacity

Given Name:: FREDRIK

Middle Name::

Family Name:: GELLERSTEDT

Name Suffix::

City of Residence:: ONSALA

State or Province of

Residence::

Country of Residence:: SWEDEN

Street of Mailing BOMMEN 4

Address::

City of Mailing Address:: ONSALA

State or Province of Mailing Address::

Country of Mailing Address:: SWEDEN

Postal or Zip Code of Mailing Address:: S-439 94

Correspondence Information

Correspondence Customer 00466

Number::

Representative Information

Representative Customer 00466
Number::

Domestic Priority Information

Application::	Continuity	Parent	Parent Filing
	Type::	Application::	Date::
This application	National Stage of	PCT/SE03/01132	6/27/03

Foreign Priority Information

Country::	Application	Filing Date::	Priority
	Number::		Claimed::
SWEDEN	0202079-0	7/3/02	Yes

Assignment Information

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::